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SERIAL NUMBER 10/687,133	FILING OR 371(c) DATE 10/15/2003 RULE	CLASS 607	GROUP ART UNIT 3762	ATTORNEY DOCKET NO. 011738.00140
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**** CONTINUING DATA *******
 This appln claims benefit of 60/504,141 09/19/2003 and claims benefit of 60/418,383 10/15/2002

**** FOREIGN APPLICATIONS *******
 UNITED STATES OF AMERICA PCT/US03/32908 10/15/2003

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 01/17/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____	STATE OR COUNTRY KS	SHEETS DRAWING 33	TOTAL CLAIMS 44	INDEPENDENT CLAIMS 3
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ADDRESS
22908

TITLE
Channel-selective blanking for a medical device system

FILING FEE RECEIVED 1332	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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